

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)**USE FEC MAILING LABEL
OR TYPE OR PRINT**Example: If typing, type
over the lines

Treasure State PAC

ADDRESS (number and street)

PO Box 76187

☐Check if different
than previously
reported. (ACC)

Washington

DC

20013

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00433680

3. IS THIS
REPORT☒NEW
(N)

OR

☐AMENDED
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15
Quarterly Report(Q1)☐July 15
Quarterly Report(Q2)☐October 15
Quarterly Report(Q3)☐January 31
Quarterly Report(YE)☐July 31 Mid-Year
Report(Non-election
Year Only) (MY)☐Termination Report
(TER)(b) Monthly
Report
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)
(Non-Election
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)
(Non-Election
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12S)

Election on

in the
State of(d) 30-Day
Post-Election
Report for the:☒

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the
State of

5. Covering Period

10

14

2010

through

11

22

2010

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Judith Zamore

Signature of Treasurer

Electronically Filed by Judith Zamore

Date

12

02

2010

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office
Use
Only**FEC FORM 3X**
(Rev. 12/2004)

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

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Write or Type Committee Name
Treasure State PAC

Report Covering the Period:

From:

M	M
1	0

D	D
1	4

Y	Y	Y	Y
2	0	1	0

To:

M	M
1	1

D	D
2	2

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1	2010	18852.36
(b) Cash on Hand at Beginning of Reporting Period	6074.98	
(c) Total Receipts (from Line 19)	12000.00	139495.94
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	18074.98	158348.30
7. Total Disbursements (from Line 31)	17323.26	157607.58
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	751.72	740.72
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00	

☒ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004)

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Write or Type Committee Name

Treasure State PAC

Report Covering the Period:

From:

M	M
1	0

D	D
1	4

Y	Y	Y	Y
2	0	1	0

To:

M	M
1	1

D	D
2	2

Y	Y	Y	Y
2	0	1	0

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	2000.00	44900.00
(ii) Unitemized	0.00	150.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	2000.00	45050.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	10000.00	93500.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	12000.00	138550.00
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	945.94
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	12000.00	139495.94
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	12000.00	139495.94

DETAILED SUMMARY PAGE

of Disbursements

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FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:			
(a) Shared Federal/Non-Federal Activity (from Schedule H4)			
(i) Federal Share.....	0.00	0.00	
(ii) Non-Federal Share.....	0.00	0.00	
(b) Other Federal Operating Expenditures.....	17963.26	88811.80	
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➤	17963.26	88811.80	
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00	
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	55935.78	
24. Independent Expenditure (use Schedule E)	0.00	0.00	
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00	
26. Loan Repayments Made.....	0.00	0.00	
27. Loans Made.....	0.00	0.00	
28. Refunds of Contributions To:			
(a) Individuals/Persons Other Than Political Committees	0.00	0.00	
(b) Political Party Committees	0.00	0.00	
(c) Other Political Committees (such as PACs)	0.00	0.00	
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00	
29. Other Disbursements.....	-640.00	12860.00	
30. Federal Election Activity (2 U.S.C 431(20))			
(a) Shared Federal Election Activity (from Schedule H6)			
(i) Federal Share	0.00	0.00	
(ii) "Levin" Share	0.00	0.00	
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00	
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00	
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	17323.26	157607.58	
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	17323.26	157607.58	

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	12000.00	138550.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	12000.00	138550.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	17963.26	88811.80
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	945.94
38. Net Operating Expenditures (subtract Line 37 from Line 36)	17963.26	87865.86

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 17

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Treasure State PAC

A.

Full Name (Last, First, Middle Initial)

Leon Billings

Mailing Address 20 Addy Rd

City

Bethany Beach

State

DE

Zip Code

19930-9776

FEC ID number of contributing
federal political committee.

C

Name of Employer
Billings Associates

Occupation
Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 3 / 2 0 1 0

Transaction ID: C7182730

Amount of Each Receipt this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

George Waters

Mailing Address 235 Massachusetts Ave NE
Ste 300

City

Washington

State

DC

Zip Code

20002-4913

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Government Relations Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: C7176838A

Amount of Each Receipt this Period

1000.00

* Earmarked Contribution:
See Below

C.

Full Name (Last, First, Middle Initial)

ActBlue

Mailing Address P.O. Box 382110

City

Cambridge

State

MA

Zip Code

02238

FEC ID number of contributing
federal political committee.

C

C00401224

Name of Employer

Occupation
Conduit total listed in Agg. field

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Transaction ID: C7176838AB

Amount of Each Receipt this Period

1000.00

[MEMO ITEM]

Note: Above Contribution
earmarked through this or-
ganization.

SUBTOTAL of Receipts This Page (optional)

2000.00

TOTAL This Period (last page this line number only)

2000.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 17

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Treasure State PAC

A.

Full Name (Last, First, Middle Initial)
LABORERS' INTERNATIONAL UNION OF NORTH AMERICA (LI

Mailing Address 905 16th St., N.W.
Second Floor

City State Zip Code
Washington DC 20006

FEC ID number of contributing
federal political committee.

C C00007922

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 8 / 2 0 1 0

Transaction ID: C7185594

Amount of Each Receipt this Period

5000.00

B.

Full Name (Last, First, Middle Initial)
National Air Traffic Controllers Association PAC

Mailing Address 1325 Massachusetts Ave NW

City State Zip Code
Washington DC 20005-4171

FEC ID number of contributing
federal political committee.

C C00238725

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 1 / 2 0 1 0

Transaction ID: C7182231

Amount of Each Receipt this Period

5000.00

SUBTOTAL of Receipts This Page (optional)

10000.00

TOTAL This Period (last page this line number only)

10000.00

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 8 / 17

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Treasure State PAC

<p>A.</p> <p>Full Name (Last, First, Middle Initial) ActBlue Technical Services</p> <p>Mailing Address 14 Arrow St</p> <p>City Cambridge State MA Zip Code 02138</p> <p>Purpose of Disbursement Credit Card Processing Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D483178</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="39.50"/></p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Alaska Air</p> <p>Mailing Address PO Box 68900</p> <p>City Seattle State WA Zip Code 98168-0900</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D487261</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="8"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="579.10"/></p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Doubletree Arctic Club Hotel</p> <p>Mailing Address 700 Third Ave</p> <p>City Seattle State WA Zip Code 98104</p> <p>Purpose of Disbursement Meal</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D485621</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="8"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="27.00"/></p>

SUBTOTAL of Disbursements This Page (optional)

645.60

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Treasure State PAC

A.

Full Name (Last, First, Middle Initial)
Doubletree Arctic Club Hotel

Mailing Address 700 Third Ave

City State Zip Code
Seattle WA 98104

Purpose of Disbursement
Travel

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D485627

Date of Disbursement

10 / 29 / 2010

Amount of Each Disbursement this Period

206.92

B.

Full Name (Last, First, Middle Initial)
Doubletree Arctic Club Hotel

Mailing Address 700 Third Ave

City State Zip Code
Seattle WA 98104

Purpose of Disbursement
Travel

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D485628

Date of Disbursement

10 / 29 / 2010

Amount of Each Disbursement this Period

230.04

C.

Full Name (Last, First, Middle Initial)
Lori LaFave

Mailing Address 200 E Jefferson St

City State Zip Code
Falls Church VA 22046-3531

Purpose of Disbursement
Fundraising Services for PAC (no fed candidates)

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D485615

Date of Disbursement

11 / 16 / 2010

Amount of Each Disbursement this Period

2500.00

SUBTOTAL of Disbursements This Page (optional)

2936.96

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 10 / 17

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Treasure State PAC

A. Full Name (Last, First, Middle Initial) Lori LaFave	Transaction ID: D485616 Date of Disbursement																				
Mailing Address 200 E Jefferson St	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>1</td><td>6</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		1	6		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		1	6		2	0	1	0												
City Falls Church State VA Zip Code 22046-3531	Amount of Each Disbursement this Period																				
Purpose of Disbursement Fundraising Services for PAC (no fed candidates)	<table border="1"> <tr> <td>2500.00</td> </tr> </table>	2500.00																			
2500.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) Lori LaFave	Transaction ID: D484043 Date of Disbursement																				
Mailing Address 200 E Jefferson St	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	5		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		1	5		2	0	1	0												
City Falls Church State VA Zip Code 22046-3531	Amount of Each Disbursement this Period																				
Purpose of Disbursement Fundraising Services for PAC (no fed candidates)	<table border="1"> <tr> <td>2500.00</td> </tr> </table>	2500.00																			
2500.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) National Car Rental	Transaction ID: D485626 Date of Disbursement																				
Mailing Address 2850 Skyway Dr	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>0</td><td>3</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		0	3		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		0	3		2	0	1	0												
City Helena State MT Zip Code 59602-1228	Amount of Each Disbursement this Period																				
Purpose of Disbursement Travel	<table border="1"> <tr> <td>287.45</td> </tr> </table>	287.45																			
287.45																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

5287.45

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 11 / 17

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Treasure State PAC

<p>A.</p> <p>Full Name (Last, First, Middle Initial) NGP Software, Inc.</p> <hr/> <p>Mailing Address 1225 I St NW Ste 1225</p> <hr/> <p>City Washington State DC Zip Code 20005-5918</p> <hr/> <p>Purpose of Disbursement Software</p> <hr/> <p>Candidate Name</p> <hr/> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D484044</p> <p>Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>1 1 / 0 3 / 2 0 1 0</div> </div> </p> <hr/> <p>Amount of Each Disbursement this Period <div> <div></div> <div>300.00</div> </div> </p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) NGP Software, Inc.</p> <hr/> <p>Mailing Address 1225 I St NW Ste 1225</p> <hr/> <p>City Washington State DC Zip Code 20005-5918</p> <hr/> <p>Purpose of Disbursement Software</p> <hr/> <p>Candidate Name</p> <hr/> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D484041</p> <p>Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>1 0 / 1 5 / 2 0 1 0</div> </div> </p> <hr/> <p>Amount of Each Disbursement this Period <div> <div></div> <div>500.00</div> </div> </p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) The Zamore Group</p> <hr/> <p>Mailing Address PO Box 76187</p> <hr/> <p>City Washington State DC Zip Code 20013-6187</p> <hr/> <p>Purpose of Disbursement Compliance & Accounting Services</p> <hr/> <p>Candidate Name</p> <hr/> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D484042</p> <p>Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>1 0 / 1 5 / 2 0 1 0</div> </div> </p> <hr/> <p>Amount of Each Disbursement this Period <div> <div></div> <div>2000.00</div> </div> </p>

SUBTOTAL of Disbursements This Page (optional)

2800.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Treasure State PAC

A. Full Name (Last, First, Middle Initial) The Zamore Group <hr/> Mailing Address PO Box 76187	Transaction ID: D484052 Date of Disbursement <div> <div>11</div> <div>03</div> <div>2010</div> </div>
<div> <div>City</div> <div>Washington</div> </div> <div> <div>State</div> <div>DC</div> </div> <div> <div>Zip Code</div> <div>20013-6187</div> </div> <div> <div>Purpose of Disbursement</div> <div>Reimburse Postage</div> </div> <div> <div>Candidate Name</div> <div></div> </div> <div> <div>Office Sought:</div> <div> <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President </div> </div> <div> <div>Disbursement For:</div> <div> <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </div> </div> <div> <div>State:</div> <div>District:</div> </div>	Amount of Each Disbursement this Period <div>7.92</div>
B. Full Name (Last, First, Middle Initial) The Zamore Group <hr/> Mailing Address PO Box 76187	Transaction ID: D484045 Date of Disbursement <div> <div>11</div> <div>03</div> <div>2010</div> </div>
<div> <div>City</div> <div>Washington</div> </div> <div> <div>State</div> <div>DC</div> </div> <div> <div>Zip Code</div> <div>20013-6187</div> </div> <div> <div>Purpose of Disbursement</div> <div>Compliance & Accounting Services</div> </div> <div> <div>Candidate Name</div> <div></div> </div> <div> <div>Office Sought:</div> <div> <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President </div> </div> <div> <div>Disbursement For:</div> <div> <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </div> </div> <div> <div>State:</div> <div>District:</div> </div>	Amount of Each Disbursement this Period <div>2000.00</div>
C. Full Name (Last, First, Middle Initial) The Zamore Group <hr/> Mailing Address PO Box 76187	Transaction ID: D485617 Date of Disbursement <div> <div>11</div> <div>16</div> <div>2010</div> </div>
<div> <div>City</div> <div>Washington</div> </div> <div> <div>State</div> <div>DC</div> </div> <div> <div>Zip Code</div> <div>20013-6187</div> </div> <div> <div>Purpose of Disbursement</div> <div>Compliance & Accounting Services</div> </div> <div> <div>Candidate Name</div> <div></div> </div> <div> <div>Office Sought:</div> <div> <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President </div> </div> <div> <div>Disbursement For:</div> <div> <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </div> </div> <div> <div>State:</div> <div>District:</div> </div>	Amount of Each Disbursement this Period <div>2000.00</div>

SUBTOTAL of Disbursements This Page (optional)

4007.92

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Treasure State PAC

A. Full Name (Last, First, Middle Initial) The Zamore Group <hr/> Mailing Address PO Box 76187	Transaction ID: D484046 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>0</td><td>3</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		0	3		2	0	1	0	
M	M	/	D	D	/	Y	Y	Y	Y													
1	1		0	3		2	0	1	0													
City Washington State DC Zip Code 20013-6187 Purpose of Disbursement Reimburse Travel Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period <table border="1"> <tr> <td>896.20</td> </tr> </table> <div style="border: 1px solid black; padding: 2px; width: fit-content;">Category/ Type</div>	896.20																				
896.20																						
B. Full Name (Last, First, Middle Initial) Alaska Air <hr/> Mailing Address PO Box 68900 <hr/> City Seattle State WA Zip Code 98168-0900 Purpose of Disbursement Travel Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D484047 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>0</td><td>3</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> Amount of Each Disbursement this Period <table border="1"> <tr> <td>610.80</td> </tr> </table> <div style="border: 1px solid black; padding: 2px; width: fit-content;">Category/ Type</div> <p>[MEMO ITEM]</p>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		0	3		2	0	1	0	610.80
M	M	/	D	D	/	Y	Y	Y	Y													
1	1		0	3		2	0	1	0													
610.80																						
C. Full Name (Last, First, Middle Initial) United Airlines <hr/> Mailing Address PO Box 66100 <hr/> City Chicago State IL Zip Code 60666-0100 Purpose of Disbursement Travel Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D484049 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>0</td><td>3</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> Amount of Each Disbursement this Period <table border="1"> <tr> <td>118.70</td> </tr> </table> <div style="border: 1px solid black; padding: 2px; width: fit-content;">Category/ Type</div> <p>[MEMO ITEM]</p>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		0	3		2	0	1	0	118.70
M	M	/	D	D	/	Y	Y	Y	Y													
1	1		0	3		2	0	1	0													
118.70																						

SUBTOTAL of Disbursements This Page (optional) ►

896.20

TOTAL This Period (last page this line number only) ►

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Treasure State PAC

A.

Full Name (Last, First, Middle Initial)
United States Senate Federal Credit Union

Mailing Address PO Box 77920

City Washington State DC Zip Code 20013

Purpose of Disbursement
Credit Card Payment, See Below

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D484050

Date of Disbursement

/ /

Amount of Each Disbursement this Period

791.40

B.

Full Name (Last, First, Middle Initial)
United Airlines

Mailing Address PO Box 66100

City Chicago State IL Zip Code 60666-0100

Purpose of Disbursement
Travel

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D484051

Date of Disbursement

/ /

Amount of Each Disbursement this Period

791.40

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

791.40

TOTAL This Period (last page this line number only)

17365.53

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
Treasure State PAC

A. Full Name (Last, First, Middle Initial) Dennis Getz Committee	Transaction ID: D485614
Mailing Address 1105 N River Ave	Date of Disbursement
City Glendive State MT Zip Code 59330	<div> <div>11</div> <div>19</div> <div>2010</div> </div>
Purpose of Disbursement Contribution returned by recipient Candidate Name	Amount of Each Disbursement this Period
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	-160.00
B. Full Name (Last, First, Middle Initial) Jack Trethewey Committee	Transaction ID: D485613
Mailing Address 1358 Boulevard Ave	Date of Disbursement
City Havre State MT Zip Code 59501	<div> <div>11</div> <div>15</div> <div>2010</div> </div>
Purpose of Disbursement Contribution returned by recipient Candidate Name	Amount of Each Disbursement this Period
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	-160.00
C. Full Name (Last, First, Middle Initial) Jesse Coates Committee	Transaction ID: D477479
Mailing Address PO Box 108	Date of Disbursement
City Forsyth State MT Zip Code 59327	<div> <div>10</div> <div>19</div> <div>2010</div> </div>
Purpose of Disbursement Contribution returned by recipient Candidate Name	Amount of Each Disbursement this Period
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	-160.00

SUBTOTAL of Disbursements This Page (optional)

-480.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 16 / 17

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
Treasure State PAC

A.

Full Name (Last, First, Middle Initial)
Pat Noonan Committee

Mailing Address PO Box 29

City Ramsay State MT Zip Code 59748

Purpose of Disbursement
Contribution returned by recipient
Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
 Disbursement For: 2010 ☐ Primary ☒ General ☐ Other (specify) ▼
 State: District:

Transaction ID: D485612

Date of Disbursement

/ /

Amount of Each Disbursement this Period

-160.00

B.

Full Name (Last, First, Middle Initial)
Shirley Hanson for SD 29

Mailing Address 1313 Deer Horn Dr

City Laurel State MT Zip Code 59044

Purpose of Disbursement
Contribution - General
Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
 Disbursement For: 2010 ☐ Primary ☒ General ☐ Other (specify) ▼
 State: District:

Transaction ID: D484040

Date of Disbursement

/ /

Amount of Each Disbursement this Period

160.00

C.

Full Name (Last, First, Middle Initial)
Wanzenried for Montana Senate

Mailing Address 903 Sky Drive

City Missoula State MT Zip Code 59804

Purpose of Disbursement
Contribution returned by recipient
Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
 Disbursement For: 2010 ☐ Primary ☒ General ☐ Other (specify) ▼
 State: District:

Transaction ID: D477478

Date of Disbursement

/ /

Amount of Each Disbursement this Period

-160.00

SUBTOTAL of Disbursements This Page (optional)

-160.00

TOTAL This Period (last page this line number only)

-640.00

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 17 / 17

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)
Treasure State PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Lori LaFave

Nature of Debt (Purpose):
Fundraising Services

Mailing Address 200 E Jefferson St

City State ZIP Code
Falls Church VA 22046-3531

Outstanding Balance Beginning This Period

2500.00

Transaction ID: D472024

Amount Incurred This Period

0.00

Payment This Period

2500.00

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
The Zamore Group

Nature of Debt (Purpose):
Compliance & Accounting
Services

Mailing Address PO Box 76187

City State ZIP Code
Washington DC 20013-6187

Outstanding Balance Beginning This Period

2000.00

Transaction ID: D472023

Amount Incurred This Period

0.00

Payment This Period

2000.00

Outstanding Balance at Close of This Period

0.00

1) **SUBTOTALS** This Period This Page (optional).....

0.00

2) **TOTALS** This Period (last page this line number only).....

0.00

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

0.00